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**VO -31286**

|                                       |                                                                                                                                                                                                                                                                                            |                       |                                     |
|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------------------------------|
| Organization Name                     | European Adoption Consultants, Inc.                                                                                                                                                                                                                                                        | Organization          | European Adoption Consultants, Inc. |
| Accreditation Cycle                   | 3019_HAGE_03/04/2015_TO_04/30/2020                                                                                                                                                                                                                                                         | Assigned to           | [REDACTED]                          |
| Organization ID                       | 3019                                                                                                                                                                                                                                                                                       | Start Date of Action  | 7/8/2016                            |
| VitalOccurrence Name                  | VO -31286                                                                                                                                                                                                                                                                                  | End Date of Action    |                                     |
| Created By                            | Council on Accreditation (Do Not Reply),<br>4/18/2016 5:10 PM                                                                                                                                                                                                                              | LOT-Hague Self Report |                                     |
| Last Modified By                      | [REDACTED] 7/8/2016 4:26 PM                                                                                                                                                                                                                                                                | Contact               | Lynn Kosin                          |
| Category of the Incident              | Adoption Disruption/Dissolution                                                                                                                                                                                                                                                            | Email Address         | lynn@eaci.com                       |
| Sub Category of the Incident          |                                                                                                                                                                                                                                                                                            | Organization Email    | margaretcole@margaretcole.com       |
| Date of the Incident                  | 3/21/2016                                                                                                                                                                                                                                                                                  | URL                   |                                     |
|                                       |                                                                                                                                                                                                                                                                                            | VO Type               | HagueSelfReport                     |
| Self Report Details                   | <p>M. [REDACTED] (Poalnd).<br/> The [REDACTED] family was having difficulty with the bonding and attachment process and sought respice care with [REDACTED]. The girl was unable to be reunited with her adoptive parents and the Tufts family is pursuing a domestic adoption of her.</p> |                       |                                     |
| Details of the Action                 |                                                                                                                                                                                                                                                                                            |                       |                                     |
| # of Annual Program Reports Submitted |                                                                                                                                                                                                                                                                                            |                       |                                     |

**Outcomes/Action**

|                                 |           |
|---------------------------------|-----------|
| Outcome                         | Action    |
| Adverse Action - Effective Date | AA Review |
| Adverse Action - Terminated     |           |

**Change in Supervised Providers**

|                                         |                                         |
|-----------------------------------------|-----------------------------------------|
| Supervised Provider Type of Change      | Supervised Provider Agreement Effective |
| Supervised Provider Name                | Supervised Provider Agreement Ended     |
| Supervised Provider Contact Information | Supervised Provider Countries           |
| Email                                   |                                         |

**Adoption Disruption/Dissolution**

|                                |                        |
|--------------------------------|------------------------|
| Disruption or Dissolution?     | Date Referral Provided |
| Type of Disruption/Dissolution | Date Referral Accepted |
| Date of Disruption/Dissolution | Date of Placement      |
| Child's DOB                    | State of Emigration    |

**GOVERNMENT  
EXHIBIT  
1:20CR424  
713**

Child's Country of  
OriginFactors Cited by  
Parents/YouthFactors Cited by  
Agency

Consent Description

Training Methods

Referral Reviewed?

Issue or Concerns  
Raised?Date of Family  
ContactIssue or Concerns  
DescriptionCentral Authority  
CommunicationPost-Placement  
RequirementsPost-Placement  
Services

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**Financial Data**Date of Fiscal Year  
EndLargest Revenue  
Source - Type

Current Assets

Largest Revenue  
Source - Amount

Current Liabilities

Total Revenues

Total Assets

Total Expenses

Total Liabilities

Total General and  
Management  
Expenses

---

**Financial Ratios**

Current Ratio

General and  
Management Expense  
RatioLong-Term Solvency  
RatioRevenue-Expense  
Ratio

Contribution Ratio

Profit and Loss  
Margin

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**Custom Links**[Financial Ratios](#)**Open Activities**

VO -31286 M+O note

Name

Task ☒

Due Date 8/19/2016

Status Not Started

Priority Normal

Assigned To [REDACTED]

Comments

**Activity History****Email: Hague Self Report – Request for Information VO -31286**

|                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name                    | Lynn Kosin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Task                    | <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Due Date                | 7/15/2016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Assigned To             | [REDACTED]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Last Modified Date/Time | 7/15/2016 2:43 PM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                         | <p><b>Additional To:</b> margaretcoble@margaretcoble.com</p> <p><b>CC:</b></p> <p><b>BCC:</b></p> <p><b>Attachment:</b> Disruption-Dissolution Report - text for webform-IC.doc</p> <p><b>Subject:</b> Hague Self Report – Request for Information VO -31286</p> <p><b>Body:</b></p> <p>Dear Lynn,</p> <p>The Council on Accreditation (COA) received the Self Report of Adoption Disruption/Dissolution which occurred on 3/21/2016. Since the information requested in the self-report form was not completed at the time of submission, please complete the attached document and attachments by July 29, 2016.</p> <p>Please reference your agency ID number 3019 and VO -31286 on the materials you submit and email them directly to me.</p> <p>If you have any questions, please contact me at [REDACTED]</p> <p>Best regards,</p> <p>[REDACTED]</p> <p>Senior Hague Accreditation Coordinator</p> <p>Council on Accreditation<br/>45 Broadway, 29th Floor   New York, NY 10006<br/>main (212) 797-3000 x 243   toll free (866) 262-8088<br/>fax (212) 797-1428</p> <p>[REDACTED] LMSW   Senior Hague Accreditation Coordinator<br/>Council on Accreditation<br/>45 Broadway, 29th Floor   New York, NY 10006<br/>main (212) 797-3000 x 243   toll free (866) 262-8088<br/>fax (212) 797-1428</p> <p><b>Confidentiality Note:</b> This e-mail and any attachments are confidential and may be protected by legal privilege. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of this e-mail or any attachment is prohibited. If you have received this e-mail in error, please notify us immediately by returning it to the sender and delete this copy from your system. Thank you for your cooperation.</p> |
| Comments                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

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